

Application Data Sheet**Application Information**

Application number::	Unassigned
Filing Date::	June 25, 2004
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	No
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	AMORPHOUS SUBSTANCE OF TRICYCLIC TRIAZOLOBENZAZEPINE DERIVATIVE
Attorney Docket Number::	40072-0009
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contractor Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Toyoaki
Middle Name::	
Family Name::	Ishikura
Name Suffix::	
City of Residence::	Kanagawa-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Pharmaceutical Research Center, Meiji Seika Kaisha, Ltd., 760, Morooka-Cho, Kouhoku-Ku, Yokohama-Shi
City of mailing address::	Kanagawa-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Takayuki
Middle Name::	
Family Name::	Ishizawa
Name Suffix::	
City of Residence::	Kanagawa-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Pharmaceutical Research Center, Meiji Seika Kaisha, Ltd., 760, Morooka-Cho, Kouhoku-Ku, Yokohama-Shi
City of mailing address::	Kanagawa-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Kenji
Middle Name::	
Family Name::	Suemune
Name Suffix::	
City of Residence::	Kanagawa-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Pharmaceutical Research Center, Meiji Seika Kaisha, Ltd., 760, Morooka-Cho, Kouhoku-Ku, Yokohama-Shi
City of mailing address::	Kanagawa-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Mayumi
Middle Name::	
Family Name::	Ishiwata
Name Suffix::	
City of Residence::	Kanagawa-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Pharmaceutical Research Center, Meiji Seika Kaisha, Ltd., 760, Morooka-Cho, Kouhoku-Ku, Yokohama-Shi
City of mailing address::	Kanagawa-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Chikako
Middle Name::	
Family Name::	Udagawa
Name Suffix::	
City of Residence::	Kanagawa-Ken
State or Province of Residence::	
Country of Residence::	Japan
Street of mailing address::	c/o Pharmaceutical Research Center, Meiji Seika Kaisha, Ltd., 760, Morooka-Cho, Kouhoku-Ku, Yokohama-Shi
City of mailing address::	Kanagawa-Ken
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

Correspondence Information

Correspondence Customer Number:: 26633
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Street of mailing address:: 1666 K Street, N.W.
Suite 300
City of mailing address:: Washington
State or Province of mailing address:: D.C.
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 20006
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Fax Number: 202-912-2020

E-Mail address:: jsacson@hewm.com

Representative Information

Representative Customer Number::	26633	
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- OR -

Representative Designation::	Registration Number::	Representative Name::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
WIPO	PCT/JP02/13558	December 25, 2002	Yes
Japan	2001-393016	December 26, 2001	Yes

Assignee Information

Assignee name::	MEIJI SEIKA KAISHA, LTD.
Street of mailing address::	4-16, Kyobashi 2-Chome, Chuo-Ku
City of mailing address::	Tokyo-To
State or Province of mailing address::	
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	